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Like most people, Dutch was a man who wore many hats. He was a loving father and husband, a minister, a provider, a loyal friend, a mentor to many, a volunteer, and a faithful servant of the Lord, just to name a few. But if you would have asked Dutch, he would have given you his little laugh and told you that he was just a simple man trying his best to do the Lord's will.

Although I had seen Dutch around the facility many times, I never go the pleasure of actually meeting him or speaking with him until I became involved with the PLUS Program in 2005. However, it did not take me long to realize that I had came in contact with someone special, I just never truly realized how special at that time. Nor did I at the time realize just how much Dutch would come to mean to me personally or the influence he would have on my life.

Although Dutch had many wonderful qualities that I came to admire very much, I think one of the things I admired most about Dutch was his genuine caring and giving nature. Just one example of Dutch's many unselfish thoughts of others was when the PLUS unit wanted to honor Dutch and Mrs. Kathy with a quilt for all they had done, not only for the program, but for the men in the program individually.

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CHARLES “DUTCH” GUNYON...CONT. FROM PAGE 1

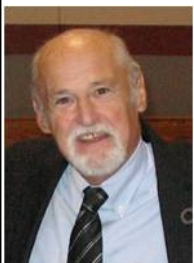
Myself and Skeeter Dull were working on a project one day when the topic came up that we had never honored Dutch and Mrs. Kathy for all the wonderful things they had done for us and the program. Knowing that Dutch had given Mrs. Kathy some beautiful material he had bought during his African mission trip, we thought it would be great to make them a quilt as a small token of our appreciation. So, during Dutch and Mrs. Kathy's next visit to the unit, I told Dutch about our idea. Dutch looked at me with a surprised look and said, "You are not going to believe this. When I gave that material to Kathy she absolutely fell in love with it and asked if I thought we could get you men to make a quilt out of it. I told her I did not think it was a good idea because you men needed to use your time to make quilts for those who were truly in need." Mrs. Kathy agreed and the material was put in a closet. Being true to his character of giving instead of receiving, in the blink of an eye Dutch managed to turn the focus from a gift for Mrs. Kathy and him to a gift for Mrs. Kathy. Thus, "Operation Trick Mrs. Kathy" was born. Interacting with Dutch during "Operation Trick Mrs. Kathy" was an absolute pleasure and nothing less than heartwarming. The gleam in his eyes spoke volumes about how this man loved to give to others. The gifting of this quilt has been one of the high points of my entire PLUS experience. But it was also during "Operation Trick Mrs. Kathy" that it truly hit home with me just how great it must make Dutch feel each and every time he gifted a quilt for no other reason that he realized they were in need of it.



It also came as no surprise to me when I learned that Dutch was true to his caring and giving nature even in death. While renewing his driver's license just two weeks prior to his death, Dutch had made the decision to become an organ donor. The doctor's were able to gift his corneas, bones, joints, muscles, heart valves, skin, veins, and arteries to several people in need. So there is no question in my mind that he is in Heaven looking over us all very pleased that he was able to give to these people he did not even know at his passing. And I am also certain that he is looking over us all very pleased to know that he continues to give to many to this very day and will continue for many years to come because my time with Dutch and his many teachings will live in my heart forever, just like I know they will with many of the lives he so wonderfully and graciously touched.

Dutch genuinely cared about the men in the PLUS program and believed in them. He had a special way of making every man he came into contact with feel like a member of his extended family. When one of my fellow participants lost his brother and was having a difficult time dealing with it, Mrs. Heacox called Dutch to let him know about the situation. Although Dutch was on a job he immediately informed the customer that he would be back to finish the job later because one of his men needed him. That's right, Dutch actually shut down a job to come to the facility and give this man some comfort in his hour of need. It is the special moments and memories like this that will live in the hearts of all who knew Dutch forever.

In closing, Dutch was one of the most genuine and sincere people I have had the pleasure of getting to know. Not only am I very proud to have called him a true friend, a wonderful mentor, and the world's greatest father figure, I can honestly say that I am a better person as a direct result of his influence in my life.



In loving memory,
Mitchell Swallows

WHAT HAVE WE BEEN UP TO?

CLIFF

On January 9, 2009 from noon to 2:30PM approximately 50 offenders attend the CLIFF graduation ceremony. Steve Sutherland, producer of the video "Meth Nation", was the guest speaker. Offender Jamie Neace and Substance Abuse Counselor Carole Pearson were interviewed by both WTHI and WTHO.



WHAT HAVE WE BEEN UP TO?

IVY TECH FILMING

Ivy Tech Representatives and P.L.U.S. Participants are creating a DVD, "Keepin It Real-A Message to the Youth", about "prison life" and the stories of some offenders that were incarcerated as teens (Patrick Cox, Brandon Serna, and Phillip Stroud) that will be distributed to organizations working with at-risk teens.



WHAT HAVE WE BEEN UP TO?

PLUS

P.L.U.S. participants made 20 quilts that were donated to the infirmary. Each bed will have one of the quilts assigned to it. Marla Gadberry, RN proposed this project and encouraged its approval.



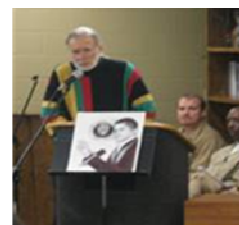
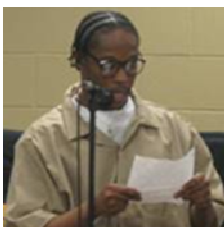
P.L.U.S. Participants created a quilt for the Programs Department—Jeremy Ducharme, Joshua Collins, and Michelle Lincoln. The logos on the quilt were hand-painted by participant John Dean and the quilt was designed and sewn by participant Steve Hooten.



WHAT HAVE WE BEEN UP TO?

BLACK HISTORY MONTH

A Martin Luther King Jr./Black History Month celebration was held in the Southside Chapel on February 21, 2009. Volunteer Stephen Brown was present along with various speakers. There were also videos playing on the offender TV system the entire month of February that commemorated the achievements of African-Americans.



WABASH VALLEY SOLDIERS

WVCF is proud to support and honor our troops currently overseas and those who have fought and returned home.

Currently Deployed:

Carlson, Darin L.: Grounds Foreman 2 / Army
 Hollis, James: Correctional Officer / Army
 Smith, Quincey D.: Correctional Officer / Army

Officers that have returned to WVCF:

Arnett, Kenneth D.: Correctional Sergeant / Army
 Brochin, Robert: Correctional Officer / Army
 Heidelberg, Johnny: Correctional Officer / Army
 Mason, Rocky A.: Correctional Officer / Army
 McMillin, Jared: Correctional Officer / Air Force
 Mifflin, Brian: Correctional Sergeant / Army



SCHEDULE OF EVENTS

June 25 th	Education – Graduation in North Gym at 12:30 pm
June 26 th	Native American Trail of Tears Program
June 28 th	Native American Feast w/Sweat Lodge Ceremony
June 29 th	Volunteer Recognition Banquet in South Chapel at 7 pm
July 24 th	CLIFF Graduation in South Chapel from 12PM to 2PM
September 5 th	Christian Motorcycle Association: Revival
September 9 th	Annual Re-Entry Audit
September 11 th -13 th	PREP Weekend
September 20 th	EID al-fitr
September 24 th -27 th	Kairos (24 th evening, 25, 26, 27 th daytime)
Sept. 25 th 26 th 27 th	PREP Weekend
October 3 rd -4 th	Inside Out Dads
October 22 nd – 25 th	Kairos
November 27 th	EID al-adha
December 5 th 6 th	Fatherhood program
December 16 th	Shia Muslim, ghadir-Kum
December 18 th	Christmas Cookie Giveaway
December 27 th	Christmas Celebrations – North, South, YIA, JHU
December 28 th	Native American – Wounded Knee Ceremony



WHAT YOU NEED TO KNOW ABOUT...HEROIN

Heroin is a synthetic opiate drug meaning that is not naturally occurring. Heroin is made from mixing two other substances: morphine and the extract from the seed pod of the Asian opium poppy plant. Heroin is typically sold as a white or brown powder or as a black sticky substance known as “black tar heroin.” Heroin is mixed with other substances, known as “cut”, such as sugar, starch, powdered milk, quinine, or poisons such as strychnine or fentanyl.



Heroin can be injected, snorted or sniffed, or smoked. Heroin is converted back into morphine in the brain and changes the perception of pain and pleasure. Heroin also affects vital brain stem functions such as breathing, blood pressure, and arousal. Most often heroin overdoses result in from the user stopping breathing.



Upon first injecting heroin the user will feel a “rush” or a sense of euphoria, along with dry mouth, warm feeling in the skin, and extremities feeling heavy. Users who do not inject the drug often do not feel the initial rush. After the rush, users feel awake and then drowsy, alternating off and on.

Heroin use and abuse often results in serious health conditions. Users may experience infectious diseases from sharing needles, collapsed veins, heart lining and valve infections, abscesses, liver and kidney disease, pulmonary complications such as pneumonia, along with the risk of fatal overdosing. The user is also at risk from the contaminants contained in heroin that can clog the blood vessels that lead to the lungs, liver, kidneys, and brain which causes permanent damage to those vital organs.

Heroin users become addicted and experience symptoms of withdrawal often within only a few hours of their last use. The body becomes adapted to the presence of the drug and any reduction in the amount of use will cause severe withdrawal symptoms including restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes with goose bumps (known as “cold turkey”), involuntary kicking (known as “kicking the habit”), and severe cravings. Withdrawal symptoms peak between 48 and 72 hours and subside after about a week. However, withdrawal symptoms can be persistent for months after the last use. Withdrawal from heroin can be severe enough to be fatal in some cases, so treatment usually begins with medically assisted detoxification. Three medications are often used for this purpose: methadone, buprenorphine, and naltrexone.



Methadone has been in use for more than 30 years. It works the same as heroin, but is a pill taken orally that has a gradual onset of effects. When it is properly prescribed methadone is not intoxicating or sedating. Methadone is only available in specialized opiate treatment programs. Buprenorphine is different from methadone in that it has less risk for overdose and withdrawal effects; and it is available to be prescribed from a physician. Naltrexone is used with highly motivated clients and can only be used in clients who are completely detoxified already to prevent severe withdrawal symptoms. It is shorter acting and often only used to treat cases of overdose. Heroin addiction will require behavioral treatments in combination with medication.

For more information visit the following websites:

1. <http://www.nida.nih.gov/infofacts/heroin.html>
2. <http://www.usdoj.gov/dea/concern/heroin.html>
3. http://www.drugfree.org/portal/drug_guide/heroin
4. <http://www.whitehousedrugpolicy.gov/DrugFact/heroin/index.html>



ELECTRONIC CIGARETTES

The newest invention in the nicotine world is the electronic cigarette. The manufacturer of the cigarette promises that it is tar-free, produces no second-hand smoke, and is cheaper than regular cigarettes. The first of these brands is SuperSmoker by a Belgian manufacturer. The cigarette, “Blue”, is sold to the US market through the website, www.supersmoker.com. This particular cigarette includes a battery, nicotine gel vaporizing atomizer, and, of course, the replaceable cartridge that feels and looks like a cigarette. The cartridges are sold in packs of 24. Each one lasts for what would be approximately the equivalent of 4 to 6 regular cigarettes. Blue is called such because the tip of the cigarette contains a crystal that shines in blue when the user inhales.



The American Cancer Society states on their website that they are not marketing this product as a nicotine replacement treatment for those who want to quit smoking. This is another device in which to take in nicotine. In essence, the claims of the electric cigarette are that it has removed all of the negative effects from cigarette smoking.

All except the addiction.



RE-ENTRY AND PROGRAMS EXTRA'S



A man injured on the job filed an insurance claim. The insurance company requested more information, so the man wrote the insurance company the following letter of explanation:

Dear Sirs:

I am writing in response to your request concerning clarification of the information I supplied in block #11 on the insurance form, which asked for the cause of the injury. I answered, "Trying to do the job alone." I trust that the following explanation will be sufficient.

I am a bricklayer by trade. On the date of the injury, I was working alone, laying brick around the top of a three-story building. When I finished the job, I had about five hundred pounds of brick left over. Rather than carry the bricks down by hand, I decided to put them into a barrel and lower them by a pulley that was fastened to the top of the building.

I secured the end of the rope at ground level, went back up to the top of the building, loaded the bricks into the barrel, and pushed it over the side. I then went back down to the ground and untied the rope, holding it securely to insure the slow descent of the barrel. As you will note in block #6 of the insurance form, I weigh 145 pounds. At the shock of being jerked off the ground so swiftly by the five hundred pounds of bricks in the barrel, I lost my presence of mind and forgot to let go of the rope.

Between the second and third floors I met the barrel. This accounts for the bruises and lacerations on my upper body. Fortunately, I retained enough presence of mind to maintain my tight hold on the rope and proceeded rapidly up the side of the building, not stopping until my right hand was jammed in the pulley. This accounts for my broken thumb (see block #4). Despite the pain, I continued to hold tightly to the rope. Unfortunately, at approximately the same time, the barrel hit the ground and the bottom fell out of the barrel. Devoid of the weight of the bricks, the barrel now weighed about fifty pounds. I again refer you to block #6, where my weight is listed. I began a rapid descent.

In the vicinity of the second floor, I met the barrel coming up. This explains the injury to my legs and lower body. Slowed only slightly, I continued my descent, landing on the pile of bricks. Fortunately, my back was only sprained. I am sorry to report, however, that at this point I again lost my presence of mind—and let go of the rope.

I trust that this answers your concern. Please note that I am finished trying to do the job alone.

Contribution by Mick Schoenrad, Director of Substance Abuse Programs